



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Pai-Hung Pan

Serial No.: 09/944,506

Filed: August 30, 2001

For: SHALLOW TRENCH ISOLATION
STRUCTURE WITHOUT CORNER EXPOSURE
(as amended)

Confirmation No.: 4348

Examiner: G. Fourson III

Group Art Unit: 2823

Attorney Docket No.: 2269-2919.5US
(96-0499.02/US)

CERTIFICATE OF MAILING

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6/28/2006
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Erika Gandre
Name (Type/Print)

RESPONSE TO FINAL OFFICE ACTION

Mail Stop AF
Commissioner for Patents
PO Box 1450
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Sir:

This Response follows the final Office Action of April 28, 2006, the three-month shortened statutory period for response to which expires on July 28, 2006. This response is being submitted within two months of the mailing date of the final Office Action.



AR
JFW

PTO/SB/21 (09-04)

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/944,506	
	Filing Date	August 30, 2001	
	First Named Inventor	Pai-Hung Pan	
	Art Unit	2823	
	Examiner Name	G. Fourson III	
Total Number of Pages in This Submission	9	Attorney Docket Number	2269-2919.5US (96-0499.02/US)

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Response to Final Office Action dated April 28, 2006 <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks The Commissioner is authorized to charge any additional fees required but not submitted with any document or request requiring fee payment under 37 C.F.R. §§ 1.16 AND 1.17 TO Deposit Account 20-1469 during pendency of this application.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	TraskBritt, P.C.		
Signature			
Printed Name	Brick G. Power		
Date	June 28, 2006	Reg. No.	38,581

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